

## Unclaimed Property Quick Claim Form

Complete this claim form including your notarized signature. **You may be required to complete and sign a standard claim form and provide additional documentation in addition to the information you provide here.**

Name as it Appears on Published List or Database*	Owner's Social Security Number or Federal ID Number
Claimant Name (if different)	Date of Birth
Current Address (Number and Street or RR#)	Property Identification Number. (This number is the number that is listed with the unclaimed property in the database or newspaper listing.)
City, State, ZIP Code	Daytime Telephone Number

Incomplete forms cannot be processed.

**FORMER ADDRESSES.** List the former addresses in Indiana used by the property owner.

Street Address	City, State, ZIP Code

### CLAIMANT CERTIFICATION

Under penalties of perjury, I certify that the information provided on this claim form is true to the best of my knowledge. Upon payment of this claim, said claimant will indemnify and hold harmless the State of Indiana, officers and employees from any damages, claims or losses of any kind resulting in payment of the property being claimed. I understand that if additional claimants should come forward to claim these funds, they may be provided with my name and address as payee to the funds.	
SUBSCRIBED AND SWORN TO BEFORE ME THIS ____ DAY OF _____, 20 ____	SIGNATURE OF CLAIMANT _____
NOTARY PUBLIC COUNTY, STATE MY COMMISSION EXPIRES _____	Printed Name _____
	Title _____

Visit Our Web Site at  
[www.indianaunclaimed.com](http://www.indianaunclaimed.com)

Mail completed Quick Claim form to:  
Unclaimed Property Division  
Office of the Indiana Attorney General  
302 W. Washington St., 5th Floor  
Indianapolis, IN 46204